

Maryland Department of
Housing and Community Development

**Maryland Housing Counseling Fund
GRANT APPLICATION
for Legal Services Organizations**

Calendar Year 2016

Division of Neighborhood Revitalization
7800 Harkins Road
Lanham, Maryland 20706
301-429-7525



The Maryland Department of Housing and Community Development pledges to foster the letter and spirit of the law for achieving equal housing opportunity in Maryland.

LEGAL SERVICES APPLICATION INSTRUCTIONS

INTRODUCTION

The Housing Counseling and Foreclosure Mediation Fund, also known as the Maryland Housing Counseling Fund (the "Fund"), was established pursuant to Section 7-105.1 of the Real Property Article and Section 4-507 of the Housing and Community Development Article of the Annotated Code of Maryland. The Fund's purpose is to support non-profit and governmental housing counselors that provide professional housing counseling, financial counseling and legal services to Maryland consumers. In the Maryland Housing Counseling Fund (MHCF) Fiscal Year 2013 through Fiscal Year 2015 competitive rounds, financial assistance was focused on helping consumers affected by the foreclosure crisis.

The CY16 round will provide up to a total of \$4.5 million in funding support to non-profit organizations and local government entities providing homebuyer education, housing advice, financial counseling or foreclosure prevention counseling for existing and prospective homeowners in Maryland.

Under the Home Owners Preserving Equity (HOPE) initiative, DHCD has coordinated the investment of State and federal funding to develop a statewide network of more than 50 local, non-profit housing counseling and legal service organizations available to assist Maryland homeowners and tenants. DHCD seeks proposals to further build and enhance that network.

Eligibility of Applicants and Activities:

This RFP invites innovative proposals for providing legal services to improve the well-being and financial stability of Maryland homeowners and tenants affected by the foreclosure crisis and economic downturn, including programs to:

- Provide homebuyer education, credit or financial counseling for existing and prospective homeowners
- Help eligible households access the Earned Income Tax Credit (EITC)
- Prevent foreclosure and provide loss mitigation assistance
- Help households access loan modifications, principal reduction, refinancing, restitution and other benefits made available by programs intended to help homeowners
- Assist tenants affected by landlord foreclosures
- Mediation – represent homeowners and help them prepare for foreclosure mediation
- Coordinate with housing counselors and other legal services organizations
- Engage pro bono legal professionals to serve consumers
- Offer other innovative ideas for utilizing legal services to improve the well-being and financial stability of vulnerable homeowners and tenants

Grants to legal services organizations will be awarded on a competitive basis to experienced nonprofit organizations. Legal Services applicants must be 501(c)(3) nonprofit legal service organizations in order to be eligible for these funds.

Criteria for determining awards:

- Proposed Service Area & Population (10 points, based on geographic need and program coverage)
- Experience and Expertise of Legal Service Team (25 points)
- Proposed Program (25 points)
- Impact of the Proposed Program (25 points)
- Partnership Strategies (15 points)

APPLICATION SUBMISSION PROCEDURES

To be considered for a grant, one (1) original and one (1) copy of an unbound application and all required attachments must be submitted **by 2:00 p.m., Friday, July 31, 2015** to:

Maryland Department of Housing and Community Development
ATTN: Maryland Housing Counseling Fund
7800 Harkins Road
Lanham, Maryland 20706
301-429-7525

THE APPLICATION

The application contains four sections:

- Section I. - General Information
- Section II. - Proposal Information
- Section III. - Documents to be Attached by Applicant

Please be sure to address all questions and include all required attachments. A checklist of the required attachments is provided at the end of Section III for your use.

SECTION I.

GENERAL INFORMATION

PART 1. APPLICANT INFORMATION

1. Applicant Organization's Legal Name: _____
Year Incorporated/Founded: _____
2. Address: _____
City: _____ State: _____ Zip Code: _____
3. Contact Person: _____ Title: _____
Phone Number: _____ Fax Number: _____
E-mail address: _____
4. Federal Tax Identification Number: _____
5. Affiliated organizations:

PART 2. APPLICANT INFORMATION

1. Applicant Organizational Name:
2. Overview of Applicant's overall organizational mission, history and recent accomplishments (*Attach as "Exhibit 2-A"*)
3. List of current Board of Directors, including organizational affiliation and address (*Attach as "Exhibit 2-B".*)
4. Audits for Last Two Years (*Attach as "Exhibit 2-C"*)
5. Operating Budgets for Current and Prior Fiscal Year (*Attach as "Exhibit 2-D"*)

PART 3. APPLICANT CERTIFICATIONS

The undersigned applicant hereby makes application to the Department of Housing and Community Development for a:

CY16 Legal Services Grant in the amount of \$_____

The applicant agrees it will not discriminate against any person on the basis of race, color, national origin, sex, marital status, sexual orientation, gender identity and expression, physical or mental disability, or age in any aspect of the project and to comply with all applicable federal, State and local laws regarding discrimination and equal opportunity in employment, housing and credit practices, including Titles VI and VII of the Civil Rights Act of 1964 and regulations pursuant thereto, Title VIII of the Civil Rights Act of 1968, as amended, and the Governor's Code of Fair Practices, as amended, and will comply with the Department's Minority Business Enterprise (MBE) Program, as applicable. Copies of the MBE Program Guidelines are available to the applicant upon request.

In accordance with Executive Order 01.01.1983.18, the Office of the Attorney General ("OAG") and the Department of Housing and Community Development (the "Department") advises you that certain personal information requested is necessary in determining your eligibility for funds from the Maryland Housing Counseling Fund from the Mortgage Loan Servicing Practices Settlement Fund (the "Program"). Your failure to disclose this information may result in the denial of grant funds under the Program. Availability of this information for public inspection is governed by the provisions of the Maryland Public Information Act, State Government Article, Sections 10-611 et seq. of the Annotated Code of Maryland. This information will be disclosed to appropriate staff of the OAG and the Department, or public officials, for purposes directly connected with administration of the Program for which its use is intended. Such information is not routinely shared with State, federal or local government agencies. You have the right to inspect, amend, or correct personal records in accordance with the Maryland Public Information Act.

The undersigned hereby certifies that the information set forth in this application and any attachments in support hereof, are true, correct and complete to the best of this applicant's knowledge and belief.

In witness whereof, the applicant has caused this document to be duly executed in its name on this _____ day of _____, 20____.

(Full Legal Name of Applicant)

By: _____
(Signature)

Name: _____

Title: _____

SECTION II.

PROPOSAL INFORMATION

PART 1.

PROPOSED AREAS OF SERVICE & POPULATIONS SERVED: (10 points)

Applicant's geographic and client focus:

- a. List the Maryland jurisdictions you propose to serve.
- b. Describe the demographics of the client base you served last year through this program. If this is a new program, describe the demographics of the client base you anticipate serving through this program.
- c. Are you proposing to serve non-English speaking households? If so, describe your experience and current capacity for doing so.
- d. Are you proposing to serve any special needs populations such as the elderly, veterans or persons with disabilities? If so, describe your experience and current capacity for doing so.

EXPERIENCE AND EXPERTISE: (25 points)

Organizational and legal team experience and track record:

- a. Describe your organization's mission and experience, highlighting the accomplishments of major programs that relate to foreclosure prevention or protection of tenants' rights.
- b. How many attorneys will your organization have providing services related to foreclosure prevention or protection of tenants' rights and what percentage of their time will be spent on those activities?
- c. If you rely upon the legal expertise of existing staff, describe their legal experience and provide resumes.
- d. If you rely upon the legal expertise of staff that will be hired, describe the minimum and desired qualities for the new position and provide a position description.
- e. If you rely upon the legal expertise of third parties, describe the legal experience and qualifications of those third parties.

PROPOSED PROGRAM/CAPACITY: (25 points)

Proposed program and the capacity to accomplish the program:

- a. Describe the program for which you are seeking funding, including the types of legal services you plan to offer.
- b. If this is a renewal or expansion of the program(s) you are conducting in CY15, describe the level of outputs (activities or people served) and the outcomes achieved to date (the difference your program made for consumers served).
- c. List the key leadership, program staff and volunteers that will be engaged in the program including their experience, education and training. Also provide resumes of key personnel.
- d. Describe any new positions you propose to add to the program and provide position descriptions.
- e. What organizational assets do you have in place that will be key to supporting a successful program (such as technology, Board leadership, volunteer networks, etc.)?
- f. Describe the ways in which you plan to leverage any grant funds with other resources and funds.
- g. Over what period of time do you plan to offer these services?

Please complete the program staff chart below. If you are seeking a renewable grant, provide the information for each proposed grant year.

Current Program Staff	FT/PT?
Name/Title:	
Name/Title:	
<i>(insert additional lines as necessary)</i>	
Additional Staff for CY16 Request, if applicable	
Name (If currently employed)/ Title:	
Name (If currently employed)/ Title:	
<i>(insert additional lines as necessary)</i>	

IMPACT OF PROPOSED PROGRAM: (25 points)

Impact of the Proposed Foreclosure Program:

- a. Describe your Program goals, including specific and realistic annual outputs (activities) and outcomes (impact) your program will accomplish annually in CY16.
- b. How does this compare to what you project to accomplish in CY15? (The answer to this question should specifically include how many people you project to serve in CY15 in foreclosure prevention and/or protection of tenants' rights and how many you are proposing to serve in CY16, including a description of the kinds of outcomes these clients achieved or will achieve as a result of your organization's assistance.)
- c. What are the key challenges to achieving these goals (besides full funding), and how will you address these challenges?
- d. What specific performance indicators/metrics will you track to evaluate progress toward your goals?

Impact of the Proposed Pre-purchase Program and/or Financial Education Program:

- a. Clearly and succinctly list your Program Goals, including specific and realistic annual outputs (activities) and outcomes (impact) that you anticipate your program will accomplish annually in CY16 based on the grants you are requesting.
- b. How does this compare to what you project to accomplish in CY15? (This question should specifically address how many people you project to serve in CY15 and how many you are proposing to serve in CY16, including what kinds of outcomes these clients achieved as a result of your organization's service.)
- c. What are the key challenges to achieving these goals (besides full funding), and how will you address these challenges?
- d. What specific performance indicators/metrics will you track to evaluate progress toward your goals?

PARTNERSHIP & COLLABORATION: (15 points)

Describe how your organization utilizes partnerships to expand the reach and impact of your services:

- a. What organizations do you collaborate or partner with to serve homeowners and/or tenants affected by foreclosure and why?
- b. What new organizations do you plan to partner with, if any, in order to strengthen the reach or effectiveness of your program?
- c. What services related to foreclosure assistance, such as bankruptcy and relocation, does your organization, or the organizations with which you collaborate or partner, provide?

PART 2. BUDGET INFORMATION

The budget is your program investment strategy and should clearly depict the sources and uses of funding for your foreclosure assistance program. Using the budget form below, please indicate sources and uses for each fiscal year. Provide a narrative explanation for major budget line items. (*Attach as "Exhibit 2-E".*) An electronic copy of this template is available at:

<http://mdhope.dhcd.maryland.gov/Counseling/Pages/CounselorsPortal.aspx>

SOURCES	ACTUAL CY15	PROJECTED CY16	TOTAL
DHCD - MHCF CY16 (This Request)			
DHCD – MHCF Supplemental FY15			
DHCD - NFMF 8			
DHCD - NFMF 9			
Local Jurisdiction (Name Agency)			
Local Jurisdiction (Name Agency)			
Foundation (Name each individually)			
Foundation (Name each individually)			
Fees			
Individuals			
Corporations			
Add lines for additional sources, if needed			
Total, Sources			
PERSONNEL USES / EXPENSES			
Staff Salaries			
Benefits (Percentage)			
Sub-Total, Personnel			
NON-PERSONNEL USES/EXPENSES			
Technology			
Rent			
Telephone			
Postage			
Printing			
Legal Fees			
Consultant			
Training			
Accounting/Audit			
Add lines for additional expenses, if needed			
Sub-Total, Non-Personnel			
Total, Uses			
Balance			

SECTION III.

DOCUMENTS

REQUIRED DOCUMENTATION

1. Do the applicant's organizational documents permit the organization to accept grants?
☐ Yes ☐ No
2. IRS 501(c)(3) Determination Letter (*Attach as "Exhibit 3-A".*)
1. Certificate of Compliance with Maryland Solicitations Act or copies of application to the Secretary of State and proof of payment (*Attach as "Exhibit 3-B".*)

REQUIRED ATTACHMENTS CHECKLIST
(Identify attachments as indicated)

Section II.

- _____ **2-A** Overview of Organization Mission, History and Accomplishments
- _____ **2-B** List of Current Board of Directors with Affiliations and Addresses
- _____ **2-C** Audits for the Last Two Years
- _____ **2-D** Operating Budget for Overall Organization for Current and Prior Fiscal Year
- _____ **2-E** Proposed Program Budget for next year
- _____ **2-F** Resumes and Position Descriptions for Legal Team and Key Personnel

Section III.

- _____ **3-A** IRS 501(c)(3) Determination Letter
- _____ **3-B** Certificate of Compliance with Maryland Solicitations Act (or copies of application to the Secretary of State and proof of payment)